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C053-03/02 US

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1616

OFFICE OF PETITIONS

Applicants

Frederick B. Oleson, Jr. et al.

Patent No.

6,852,689

Issue Date

February 8, 2005

For

METHODS FOR ADMINISTRATION OF ANTIBIOTICS

ATTENTION: MAINTENANCE FEE DEPARTMENT

COMMISSIONER FOR PATENTS Washington, DC 20231

Communication under 37 C.F.R. 1.28(c)

The 3 ½ year maintenance fee in the above-identified patent was paid in the amount of \$465.00, i.e. at the small entity rate, on August 8, 2008. This payment was within the window period for the payment of the maintenance fee. The current fee for a large entity 3 ½ year maintenance fee is \$980.00. Applicants wish to pay the difference between the current large entity fee and the small entity fee actually paid. The amount due is \$515.00.

The Commissioner is authorized to deduct the amount due and any deficient amount to Deposit Account No. 50-1986.

Respectfully submitted,

Date: January 27, 2010 Cubist Pharmaceuticals, Inc.

65 Hayden Avenue

Lexington, Massachusetts 02421

Tel.: (781) 860-8660 Fax: (781) 860-1407 William D. DeVaul Reg. No. 42,483

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	r 37 C.F.R. 1.28(c)) is being facsimile tra nissioner for Patents, Washington, D.C. 2	nemitted to	m, Fee Transmittal Sheet, Communication o Mail Stop Maintenance Fee Department, mile number 571-273-8300 on January 27,
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PTO/SB/21 (07-09)
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Application Number 10/082 544 10/082,544 TRANSMITTAL Filling Date February 20, 2002 First Named Inventor FORM Frederick B. Oleson, Jr., ot al. Art Unit 1616 Examiner Name Frank Choi OFFICE OF PETITIONS (to be used for all correspondence after initial filing) Attorney Docket Number C053-03/02 US Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC $|\checkmark|$ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Grief) Petition Amendment/Repty Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please identify Terminal Olaclaimer Extension of Time Request below): Communication Under 37 C.F.R, 1.28(c) Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certifled Copy of Priority Remarks Document(s) U.S. Patent No. 6,852,689 Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Cubist Pharmaceuticals, Inc. Signature Printed name William D. DeVaul Date Rog. No. 42,483 January 27, 2010 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with aufficient postage es first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gethering, preparing, and submitting the complete depolication form to the USPTQ. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sont to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Comments page for Parinter R.O. Box 1450, Alexandria, VA. 22313-1450. ADDRESS. SEND TO: Commissioner for Patonts, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known		
FEE TRANSMITTAL	Application Number	10/082,544	BECEIVED	
LEE INVINOIMILIAL	Filing Date	February 20, 2002		

515.00

For FY 2009 FEB 03 2010 First Named Inventor Frederick B. Oleson, Jr., et a Examiner Namo Applicant claims small entity status. See 37 CFR 1.27 Frank Chol OFFICE OF PETITIONS Art Unit 1616 TOTAL AMOUNT OF PAYMENT 515.00 Attorney Docket No. C053-03/02 US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 50-1986 Deposit Account Name: Cubist Pharmaceuticals For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✓ Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(a) or underpayments of foc(s) Credit any overpayments under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038, FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity **Application Type** Fee (\$) Foo (\$) Fee (\$) Fee (\$) Fees Paid (\$) Foo_(\$) Fee (\$) Utility 330 165 540 270 220 110 Design 220 110 100 50 140 70 Plant 220 110 330 165 170 85 Reissue 330 165 540 270 650 325 Provisional 220 110 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissucs) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. indep, Claims Extra Claims Fee (\$) Foo Paid (\$) - 3 or HP = HP = highost number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Pald (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (S) Non-English Specification, \$130 fee (no small entity discount)

SUBMITTED BY			
Signature	MAD Dah	Registration No. (Attorney/Agent) 42,483	Telephone 781-860-8660
Name (Print/Type	William D. DeVaul		Date January 27, 2010

Other (e.g., late filing surcharge): Adjustment to large entity fee

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